	Substitute for Form PTO-875										Application or Docket Number			
	CLAIMS AS FILED - PART I									<u> </u>	<u> </u>	10/621	,88	
	FOR			(Column 1)		(Column 2)		SMALL ENTITY		′	OR	OTH	· OTHER THAN SMALL ENTIN	
٠.	8ASIC FEE (37 CFR 1.16(a)	"	NUMBER FILED		NUMBER EXTRA		_	· RATE	FE	E			TT ENTIT	
•	TOTAL CLAIMS (37 CFR 1.16(c)	, .	min 20						5_		OR	RATE	· FI	
	(37 CFR 1.16(b)	CLAIMS	minus 20 =					x s 25	'=		OR	x s 50.	\$	
	MULTIPLE DEPENDENT CLAIM PRESENT . (37 CFR 1 16(d))						\dashv	x s 100			OR	x , 200	-	
	If the difference in column 1 is less than zero, enter "0" in column 2.							+5.180			ŌR	+360	+	
								TOTAL			OR	TOTAL	 	
	CLAIMS AS AMENDED - PART II											·OIAC		
f	∢ 2	(Column)			olumn 2) (Column 3)	SMALI	. ENTITY		OR	OTHE	R THAN	
-		REMAININ AFTER	(G	NU	SHEST IMBER MOUSL	PRESENT	7 [RATE	ADDI-	7	٦	SMALL	ENTITY	
1	Total Total (3) CFR 1.16(c) Independent U (3) CFR 1.16(n)	AMENDME	NT Min	PAI	O FOR	Y EXTRA	1		TIONAL	· -		RATE	ADDI TIONAL	
1			Mine	3	<u>4)</u>	-	7 1	x s <u>25</u> =			٦ -	× 50 =	FEE	
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							x s 100 _±		OF	_	c s 2000		
	(Column 1)							+ s (80)=		. OF		,360		
1								OD'L FEE		OR	T A	OTAL DO'L FEE		
	α <u>-</u>	CLAIMS REMAINING AFTER	i	HIGH NUM PREVIO	EST BER	(Column 3) PRESENT	-	RATE	ADOI- TIONAL FEE		[
ANG NO NO NO	Total (37 CFR 1.16(cl)	AMENDMEN	Minus	PAID		EXTRA						RATE	ADDI- TIONAL	
N C	Independent (37 CFR 1.16(6))		' Minus	 			_	<u>. 25</u>		OR	x :	50 ₌	FEE	
3	FIRST PRESEN	_	s 100 =		OR	×s	200							
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) + \$ 180= TOTAL												360		
_	·	(Column 1)	•	(Colum	nn 21	(Column 2)	AD.	D.T. EEE		OR	ADI	TAL D'L FEE		
AENT C		CLAIMS REMAINING AFTER AMENOMENT		HIGHE NUMB PREVIOU PAID F	ST ER JSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL		R	RATE	ADOI-	
VQV	(37 CFR 1.16(c)) Indépendent		Minus	••		=		25	FEE				TIONAL FEE	
AMENDM	(31 CFR 1.16(6))	· .	Minus	444		=	_	100		OR		20 T		
	FIRST PRESENT	ATION OF MULTIPL	E DEPENDE	ENT CLAIM		80		OR		200				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20". The "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".														
	" " " Highest N	umber Previously mber Prexiously (WOE IS	less than 20 ent	er "20" r "3".							

reviously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1. the "Highest Number Prexiously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of lime you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DONOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.